

ISSUE SLIP STAPLE AREA (for additional cross references)

| DN | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | YIN | | 08-08-01 |
| O.I.P.E. CLASSIFIER | | 22 | 8/14/01 |
| FORMALITY REVIEW | SW | 1143 | 9/24/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 12/12/03 |
| 2 | ✓ | ✓ | 6/7/04 |
| 3 | ✓ | ✓ | |
| 4 | ✓ | ✓ | |
| 5 | ✓ | ✓ | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy

1/4/2/4
 6.8.